

**WESTERN INVENTION
SUBMISSION CORP.**

217 Ninth Street Pittsburgh, PA 15222-3506

WISC OFFICE

YP

**BASIC INFORMATION
PACKAGE AGREEMENT #**
SAM 334-1563U

Client Mr. Mrs. DENISE MURRAY Are you 18 years of age or older? YES
Address 1130 DUCHOW WAY #7
City FOLSOM State CA. Zip 95630
Telephone: Work (916) 961-1786 area code 983-7237 area code 983-7237
Occupation ASST. MGR. SNACK BAR Invention/Idea/Product EDGE - IT

STATUS OF INVENTION

- Illustrations/Drawings Product In Production
 Photographs Copyright or Trademark
 Model or Prototype Patent Pending

Client's Unit Production Cost Estimate: \$4.00 EACHClient's Suggested Retail Price: \$19.95 EACH**BEST AVAILABLE COPY**

- Client has inventory
 Patent Issued # _____

Firms Contacted Before WISC: NONEField Test Use: PERSONAL USE ONLY**BASIC INFORMATION PACKAGE CONSIDERATIONS**

In consideration of the fees stated below, WISC agrees to prepare a report containing basic information in the following categories:

Product concept description & history (based on client's disclosure to WISC)

Production considerations

Estimated retail price, manufacturing & wholesale costs

Coding of your invention by Standard Industrial Classification

Function and appealing features

- Benefits, appeals and trends for consumers and/or society
- Potential target markets (based on Trade & Government Statistics)
- A visual industry graph (if available for your idea)
- Potential channels of distribution and outlets
- Promotional considerations

You will receive a 20-30 page bound report in which WISC assembles basic information and attempts to emphasize the most positive features of your idea. The contents of the report are described in WISC's Basic Information Package brochure which we have provided to you.

A preliminary U.S. patentability search and opinion will be included as a part of this service unless you request below that this work not be performed. We intend to refer your request for a preliminary patentability search and opinion to a patent law firm to which we refer our clients' patent work.

You hereby authorize WISC to provide to said patent attorney any information he may require from your file and to receive information from said patent attorney concerning the status of work he is performing on your behalf. You may, if you wish, engage a patent attorney of your own choosing. Please check the appropriate box below:

- I wish to have a preliminary patentability search and opinion conducted for my idea, and request that WISC refer my request for this work to the patent law firm to which it refers its clients' patent work. Further, I authorize my patent attorney and WISC to share information regarding my idea and the preliminary patentability search and opinion.
- I wish to have a preliminary patentability search and opinion conducted for my idea, but wish to choose a patent attorney on my own. Accordingly, the cost of the Basic Information Package will be reduced by \$164.
- I do NOT wish to have a preliminary patentability search and opinion conducted for my idea. Accordingly, the cost of the Basic Information Package will be reduced by \$164.

x Denise MurrayAUG. 29th, 2001

FEESBasic Information Package Report \$ 875 00

(\$164 of this fee will be paid for a preliminary patentability search and opinion and I authorize WISC to disburse this amount to the patent attorney for these patent services unless otherwise indicated above.)

Being paid by: Check Money OrderCASH #875 00 pd. in fullDate AUG. 29, 2001

Charge fee to:

VISA MasterCard Discover AmEx

Card# _____

Expiration Date _____

Signature _____

(Client)

I request that a Basic Information Package be prepared for my idea, invention, product or product modification described above. I understand that:

The Basic Information Package report is not an evaluation of my idea, but rather assembles basic information and attempts to emphasize the most positive features of my idea.

WISC accepts most ideas and does not determine the feasibility of my idea. WISC relies on my belief that I am the original inventor.

WISC cannot be aware of or responsible for the existence of similar concepts which may already be on the market or may be introduced at a later time. It is not possible to adequately check the marketplace for similar products. WISC performs a very limited competitive check usually through catalogs.

WISC is assembling information regarding my idea for the preparation of a Basic Information Package. I authorize WISC to share this information with the patent attorney engaged to perform patent services on my behalf.

Signed Dan L. Swent

(WISC Representative or Agent)

Date AUG. 29th, 2001Signed Denis Murray

(Client/Inventor-Owner)

Date AUG. 29th, 2001Signed W.L.S.

(Co-Inventor)

Date AUG 29th, 2001**BEST AVAILABLE COPY**

THE PURCHASE OF INVENTOR ASSISTANCE IS A HIGH-RISK EXPENDITURE.

FULL PATENT PROTECTION PROVIDES LEGAL PROTECTION FOR IDEAS AND INVENTIONS. WE GIVE NO ADVICE AS TO WHETHER YOUR IDEA IS PATENTABLE. SUCH ADVICE MAY COME ONLY FROM A PATENT ATTORNEY OR LICENSED PATENT AGENT.

- YOU SHOULD TREAT YOUR IDEA AS A CONFIDENTIAL SUBJECT IN ORDER TO AVOID LOSING ANY PATENT RIGHTS YOU MAY HAVE.
- IF YOU WISH PATENT ADVICE, IT IS ADVISABLE THAT YOU SEEK ADVICE FROM AN INDEPENDENT PATENT ATTORNEY.

NOTICE OF CANCELLATION

If you change your mind, you can cancel this Contract, for any reason, within seven (7) business days after you signed it. If you mailed us the Contract, you can cancel it within seven (7) business days after you put the Contract in the mail. There will be no penalty or obligation if you cancel under this provision. Within ten (10) business days after we receive your written cancellation notice we will return, by mail, all monies paid by you to us pursuant to the Contract that you have cancelled.

If you choose to mail your cancellation notice, it must be placed in the United States mail properly addressed, certified mail, postage prepaid, return receipt requested, and post-marked before midnight of the last day allowed for cancellation.

Attach copies of any relevant material or information — let client keep originals. DO NOT send models unless requested.

Please type a plus sign (+) inside this box →

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|---|------------------------|------------------|
| | | Application Number | 37 CFR. 1.63 |
| | | Filing Date | 12-28-01 |
| | | First Named Inventor | Denise R. Murray |
| | | Group Art Unit | |
| | | Examiner Name | |
| Total Number of Pages in This Submission | 9 | Attorney Docket Number | |

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input checked="" type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input checked="" type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|-------------------------|----------------------|--|
| Firm or Individual name | Denise Renee. MURRAY | |
| Signature | Denise Murray | |
| Date | 12-28-01 | |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

| | | |
|-----------------------|---------------------|----------|
| Typed or printed name | Denise Renee MURRAY | |
| Signature | Denise Murray | |
| | Date | 12-28-01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

1-14-02

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Please type a plus sign (+) inside this box →

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|------------------------|-------------------------|
| Attorney Docket No. | |
| First Inventor | <i>Denise R. MURRAY</i> |
| Title | <i>Inventor</i> |
| Express Mail Label No. | |

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages **9**]
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets **1**]
5. Oath or Declaration [Total Pages **9**]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No. _____ / _____

Prior application information: Examiner _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | | | | |
|--|--|-----------|--------------|--|-------|--|
| <input type="checkbox"/> Customer Number or Bar Code Label | <small>Insert Customer No. or Attach Bar Code Label here</small> | | or | <input checked="" type="checkbox"/> Correspondence address below | | |
| Name | <i>Denise Renee Murray</i> | | | | | |
| Address | <i>1130 Ducklow way #70</i> | | | | | |
| City | Folsom | State | ca | Zip Code | 95630 | |
| Country | U.S. | Telephone | 916-983-7237 | Fax | | |

| | | |
|-------------------|-------------------------|-----------------------------------|
| Name (Print/Type) | <i>Denise R. Murray</i> | Registration No. (Attorney/Agent) |
| Signature | <i>Denise Murray</i> | |
| | Date | 12-28-01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JC971-U.S.P.T.O.

01/09/02

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Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

JC971 U.S.P.T.O.
10/04/3416

| | |
|------------------------|-------------------------|
| Attorney Docket No. | |
| First Inventor | <i>Denise R. Murray</i> |
| Title | |
| Express Mail Label No. | |

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages **9**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets **1**]
5. Oath or Declaration [Total Pages]
 a. Newly executed (original or copy)
 b. Copy from a prior application (37 CFR 1.63-(d))
(for continuation/divisional with Box 18 completed)

i. **DELETION OF INVENTOR(S)**
 Signed statement attached deleting inventor(s)
 named in the prior application, see 37 CFR
 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
 Box Patent Application
 Washington, DC 20231

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8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
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ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)
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14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No.: _____ / _____

Prior application information: Examiner _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | |
|--|--|-----------|--|
| <input type="checkbox"/> Customer Number or Bar Code Label | <small>Insert Customer No. or Attach Bar Code Label Here</small> | | <input checked="" type="checkbox"/> Correspondence address below |
| Name | <i>Denise R. Murray</i> | | |
| Address | <i>1130 Dutchow way # 7</i> | | |
| City | <i>Folsom</i> | State | <i>ca</i> |
| Country | <i>U.S.</i> | Telephone | <i>916-983-9237</i> |
| Zip Code | <i>95630</i> | | |
| Fax | <i> </i> | | |

| | | | |
|-------------------|-------------------------|-----------------------------------|---------------------|
| Name (Print/Type) | <i>Denise R. Murray</i> | Registration No. (Attorney/Agent) | |
| Signature | <i>Denise Murray</i> | | Date <i>0107-02</i> |

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(express mail)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 370.00)

Complete If Known

| | |
|----------------------|------------------|
| Application Number | 37 CFR 1.63 |
| Filing Date | 12-28-01 |
| First Named Inventor | Denise R. murray |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | |

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

| | |
|------------------------|--|
| Deposit Account Number | |
| Deposit Account Name | |

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|--------------|--------------|------------------------|---------------|-----------------|----------|
| 101 740 | 201 370 | Utility filing fee | | | |
| 106 330 | 206 165 | Design filing fee | | | |
| 107 510 | 207 255 | Plant filing fee | | | |
| 108 740 | 208 370 | Reissue filing fee | | | |
| 114 160 | 214 80 | Provisional filing fee | | | |

SUBTOTAL (1) (\$ 370.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | -20** = | X | = |
|--------------------|---------|---|---|
| Independent Claims | - 3** = | X | = |
| Multiple Dependent | | | = |

Extra Claims Fee from below Fee Paid

370.00

Large Entity

| Large Entity | Small Entity | Fee Description |
|--------------|--------------|--|
| 103 18 | 203 9 | Claims in excess of 20 |
| 102 84 | 202 42 | Independent claims in excess of 3 |
| 104 280 | 204 140 | Multiple dependent claim, if not paid |
| 109 84 | 209 42 | ** Reissue independent claims over original patent |
| 110 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 370.00)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|--------------|--------------|--|---------------|-----------------|----------|
| 105 130 | 205 65 | Surcharge - late filing fee or oath | | | |
| 127 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet | | | |
| 139 130 | 139 130 | Non-English specification | | | |
| 147 2,520 | 147 2,520 | For filing a request for ex parte reexamination | | | |
| 112 920* | 112 920* | Requesting publication of SIR prior to Examiner action | | | |
| 113 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action | | | |
| 115 110 | 215 55 | Extension for reply within first month | | | |
| 116 400 | 216 200 | Extension for reply within second month | | | |
| 117 920 | 217 460 | Extension for reply within third month | | | |
| 118 1,440 | 218 720 | Extension for reply within fourth month | | | |
| 128 1,960 | 228 980 | Extension for reply within fifth month | | | |
| 119 320 | 219 160 | Notice of Appeal | | | |
| 120 320 | 220 160 | Filing a brief in support of an appeal | | | |
| 121 280 | 221 140 | Request for oral hearing | | | |
| 138 1,510 | 138 1,510 | Petition to institute a public use proceeding | | | |
| 140 110 | 240 55 | Petition to revive - unavoidable | | | |
| 141 1,280 | 241 640 | Petition to revive - unintentional | | | |
| 142 1,280 | 242 640 | Utility issue fee (or reissue) | | | |
| 143 460 | 243 230 | Design issue fee | | | |
| 144 620 | 244 310 | Plant issue fee | | | |
| 122 130 | 122 130 | Petitions to the Commissioner | | | |
| 123 50 | 123 50 | Processing fee under 37 CFR 1.17(q) | | | |
| 126 180 | 126 180 | Submission of Information Disclosure Stmt | | | |
| 581 40 | 581 40 | Recording each patent assignment per property (times number of properties) | | | |
| 146 740 | 246 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | | | |
| 149 740 | 249 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | | | |
| 179 740 | 279 370 | Request for Continued Examination (RCE) | | | |
| 169 900 | 169 900 | Request for expedited examination of a design application | | | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 370.00)

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|------------------|-----------------------------------|--|-----------|--------------|
| Name (Print/Type) | Denise R. murray | Registration No. (Attorney/Agent) | | Telephone | 916-983-7237 |
| Signature | Denise Murray | | | | |
| Date | 12-28-01 | | | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization in PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**PLANT
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications filed under 37 CFR 1.53(b))

| | |
|------------------------|--|
| Attorney Docket No. | |
| First Named Inventor | |
| Title | |
| Express Mail Label No. | |

1c971 U.S. PRO
10/043416
01/09/02



ADDRESS TO:
**Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231**

APPLICATION ELEMENTS

See MPEP chapters 600 & 1600 concerning plant patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status. See 37 CFR 1.27.
3. Specification [Total Pages]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Latin name of genus and species
 - Variety denomination
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings
 - Detailed Botanical Description
 - A single claim
 - Abstract of the Disclosure
4. Color drawing(s) [Total Sheets]
(2 copies required - 37 CFR 1.165(b))
5. Oath or Declaration [Total Pages]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76.

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))
8. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)
9. English Translation Document (if applicable)
10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
11. Preliminary Amendment
12. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
14. Request Nonpublication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
15. Other:
.....

Note: Please state the Latin name and variety denomination of the plant claimed in a separate section of the specification.

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76.

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code label 
Please print clearly or attach bar code (see here) or Correspondence address below

| | | | |
|---------|-----------|----------|--|
| Name | | | |
| Address | | | |
| City | State | Zip Code | |
| COUNTRY | Telephone | Fax | |

| | |
|-------------------|-----------------------------------|
| Name (Print/Type) | Registration No. (Attorney/Agent) |
| Signature | Date |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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10/043416
01/09/02

DESIGN PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|------------------------|--|
| Attorney Docket No. | |
| First Named Inventor | |
| Title | |
| Express Mail Label No. | |

ADDRESS TO:
Assistant Commissioner for Patents
Box Design
Washington, DC 20231

DESIGN V. UTILITY: A "design patent" protects an article's ornamental appearance (e.g., the way an article looks) (35 U.S.C. 171), while a "utility patent" protects the way an article is used and works (35 U.S.C. 101). The ornamental appearance of an article includes its shape/configuration or surface ornamentation upon the article, or both. Both a design and a utility patent may be obtained on an article if invention resides both in its ornamental appearance and its utility. For more information see MPEP 1502.01.

APPLICATION ELEMENTS

See MPEP chapter 1500 concerning design patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages]
(preferred arrangement set forth below, MPEP 1503.01)
 - Preamble
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Description of the figure(s) of the drawings
 - Feature description
 - Claim (only one (1) claim permitted, MPEP 1503.03)
4. Drawing(s) (37 CFR 1.152) [Total Sheets]
5. Oath or Declaration [Total Pages]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 16 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application, see
37 CFR 1.63(d)(2) and 1.33(b)
6. Application Data Sheet. See 37 CFR 1.76

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))
8. 37 CFR 3.73(b) Statement Power of
(when there is an assignee) Attorney
9. English Translation Document (if applicable)
10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
Citations
11. Preliminary Amendment
12. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
14. Request for Expedited Examination of
a Design Application (37 CFR 1.155)
(NOTE: Substitute "Box Expedited Design" for
"Box Design" in the address indicated above.)
15. Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner _____

Group Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

| | | |
|--|-----------|---|
| <input type="checkbox"/> Customer Number or Bar Code Label | | <input type="checkbox"/> Correspondence address below |
| Name | | |
| Address | | |
| City | State | Zip Code |
| Country | Telephone | Fax |

Name (Print/Type)

Registration No. (Attorney/Agent)

Signature

Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Design, Washington, DC 20231.